

**MOTION BY SUPERVISORS MARK RIDLEY-THOMAS  
AND HILDA SOLIS**

**JUNE 2, 2015**

**Expanding Effective and Integrated Services for Homeless Single Adults in  
Regions with Highest Geographic Burden**

On June 11, 2013, the Los Angeles County (County) Board of Supervisors (Board) directed the Chief Executive Officer (CEO) to develop recommendations to reprogram currently unspent Countywide Homeless Prevention Initiative (HPI) one-time funds and ongoing non-district funds starting in the 2013-14 Fiscal Year in a manner that promotes both permanent supportive housing and best practices, and allocates resources based on geographic burden and need as determined by the latest homeless count results for the Los Angeles, Glendale, Pasadena and Long Beach continua of care.

The CEO responded with a report dated October 30, 2013, which included recommendations that directed the Departments of Health Services (DHS), Mental Health (DMH), Public Social Services (DPSS), and Public Health (DPH) to establish a model of care for homeless single adults. The goal of the model of care is to permanently house and provide supportive services to homeless single adults who have physical and/or mental health conditions, and who may also have co-occurring substance use issues.

**- MORE -**

MOTION

SOLIS \_\_\_\_\_

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On November 12, 2013, the Board directed the CEO, in coordination with DHS, DMH, DPSS, and DPH, to implement the recommendations included in the CEO's October 30, 2013 report and establish a single adult model (SAM) plan to provide an infrastructure to reduce homelessness for the single adult population. The Board directed the CEO to disburse the currently unspent countywide one-time HPI funds and any ongoing non-district funds by Service Planning Areas (SPAs) based on the latest homeless counts of the four continua of care in the County.

The components of the SAM plan include rental subsidies, ongoing case management, and supportive services, interim housing, and multidisciplinary integrated teams (MITs) to provide street and shelter-based intensive engagement and support. The SAM plan also included distributing rental subsidy and staffing resources by SPA based on geographic burden. The plan recommended that seven MITs be created - one MIT each in SPAs 1, 2, 4, 5, 6, and 8 and one MIT for SPAs 3 and 7. According to the SAM plan, four full-time equivalent registered nurses (proposed in-kind County contribution) would be assigned to the MITs according to geographic need.

On May 11, 2015, the Los Angeles Homeless Services Authority (LAHSA) released its 2015 homeless count showing a high rate of homelessness in SPA 4 and SPA 6 and increasing homelessness Countywide (see Attachment I). The 2015 homeless counts for the County's four continua of care demonstrated that SPA 4 had the highest burden of homeless single adults (27.7%), followed by SPA 6 (16.2%), SPA 8 (12.1%) and SPA 2 (11.7%) (see Attachment II).

On May 19, 2015, DMH submitted a Board letter requesting approval of funding for seven MITs. According to the DMH transmittal, each of the seven MITs will be staffed equally, with 4 full-time staff and two part-time staff. It is imperative that resources for the SAM plan are targeted to the SPAs with the greatest geographic burden and need as demonstrated by the latest homeless count results, as has been directed by the Board.

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The CEO and partners such as DMH, DHS, DPH, DPSS and LAHSA have been working to align and integrate funding in a way that maximizes the effectiveness of County resources and ensures that efforts are combined. There is a need to balance providing core services across the County while at the same time ensuring that the County address priorities based on the latest homeless counts and the needs of different regions.

**WE THEREFORE MOVE THAT THE BOARD OF SUPERVISORS:**

- 1) Approve the Department of Mental Health Board letter (Agenda No. 29) to enhance the provision of field-based integrated mental health, physical health and substance use services throughout the County to homeless single adults through establishment of Multidisciplinary Integrated Teams (MITs);
- 2) Direct the Interim Chief Executive Officer (CEO) and the Director of the Department of Mental Health to identify funds that can be used to add one MIT in the Skid Row region of SPA 4, and proportionally augment staffing for the MITs in SPA 6, SPA 8, and SPA 2, given that these regions demonstrate the highest geographic burden of homelessness among single adults, as determined by the 2015 homeless count results for the Los Angeles, Glendale, Long Beach and Pasadena continua of care (see Attachment II);
- 3) Direct the Director of Mental Health to work with County Counsel to determine the process for identifying a qualifying provider for the additional MIT to be implemented in the Skid Row region of SPA 4, to notify the Board prior to entering into any agreement for this area, and to amend contracts of providers delivering MIT services in SPAs 6, 8 and 2; and
- 4) Report back in writing in 60 days.

**WE FURTHER MOVE THAT THE BOARD OF SUPERVISORS** direct the Interim CEO, in coordination with the Directors of the Departments of Mental Health (DMH),

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Health Services (DHS), Public Health (DPH), Public Social Services (DPSS) and the Los Angeles Homeless Services Authority (LAHSA) to:

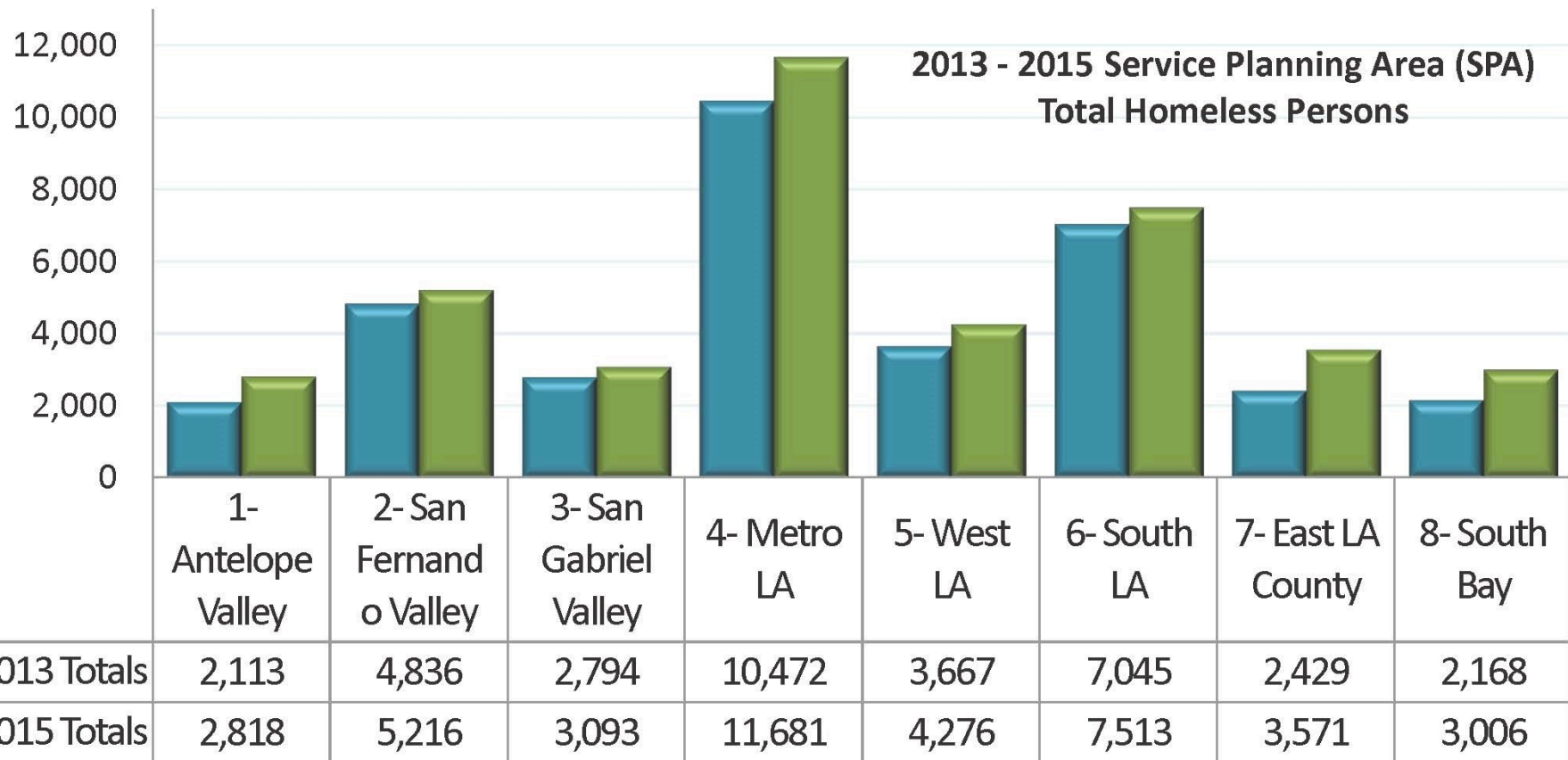
- 5) Report back in writing in 60 days on efforts to identify additional annual Homeless Prevention Initiative ongoing funds, as directed by the Board of Supervisors on June 11, 2013, given the results of the latest homeless counts; and
- 6) Provide an update on the coordination and implementation of all single adult homeless outreach and engagement efforts, including the Single Adult Model and MITs, the Coordinated Entry System for single adults, LAHSA outreach teams, DMH Homeless Outreach Mobile Engagement (HOME) Team, DMH Integrated Mobile Health Teams (IMHTs), and other current and proposed County-funded outreach teams, so that these efforts result in a systematic Countywide strategy.

YV/DW

# 2015 Service Planning Areas (SPAs)



**Excluding Glendale, Long Beach and Pasadena, every SPA experienced an increase in homelessness since 2013.**



## ATTACHMENT II

Los Angeles County Single Adult Population, 2015				
Service Planning Areas	2015 Single Adults in LA Continuum of Care (CoC)	2015 Single Adults in Other CoCs (Glendale - SPA 2, Pasadena - SPA 3, and Long Beach - SPA 8)	2015 Total Single Adults in LA County	2015 % Per SPA Single Adults in LA County
1- Antelope Valley	2,168		2,168	6.0%
2- San Fernando Valley	4,081	127	4,208	11.7%
3- San Gabriel Valley	2,505	513	3,018	8.4%
4- Metro LA	9,958		9,958	27.7%
5- West LA	3,561		3,561	9.9%
6- South LA	5,826		5,826	16.2%
7- East LA County	2,833		2,833	7.9%
8- South Bay	2,456	1,936	4,392	12.2%
<b>Total</b>	<b>33,388</b>	<b>2,576</b>	<b>35,964</b>	<b>100.0%</b>